

after the junior Senator from Washington.

Mr. CRAIG. Mr. President, I amend my unanimous consent request and ask unanimous consent that following the comments of the Senator from Oregon, Senator MURRAY from the State of Washington be allowed to speak, followed by the Senator from Florida, who would make the final remarks of the evening.

The PRESIDING OFFICER. Without objection, it is so ordered.

The Chair recognizes the Senator from Oregon.

Mr. WYDEN. I thank the Chair.

MEDICARE COVERAGE FOR PRESCRIPTION DRUGS

Mr. WYDEN. Mr. President, and colleagues, this is the seventh time I have come to the floor of the Senate in recent days to talk about the issue of Medicare coverage for prescription drugs. The reason I do so is I think it is so important that before we wrap up our work in this session of Congress, we take action on this matter, given how many vulnerable senior citizens there are in this country who simply cannot afford their prescriptions.

There is just one bipartisan bill with respect to prescription drug coverage now before the Senate. It is a piece of legislation known as the SPICE Act, the Senior Prescription Insurance Coverage Equity Act.

It is a bipartisan bill on which I have teamed with Senator OLYMPIA SNOWE of Maine; and it is one that the two of us are very hopeful this Congress will act on before we conclude our work.

There are some who think this issue is too controversial and too difficult to tackle before the next election. I would note that it is going to be more than a year until the next election. We are going to have a lot of senior citizens who are walking on an economic tight-rope, every week balancing their food costs against their fuel costs, and their fuel costs against their medical bills, who are not going to be able to pay for their prescriptions and their necessities if the Senate decides to duck this issue and put it off until after the next election. I think the reason we are sent here is to tackle issues and not just put them off until after the election.

Over the last few months, Senator SNOWE and I have worked with senior citizen groups; we have worked with people in the pharmaceutical sector, in the insurance sector, various public and private-sector organizations; and we believe the SPICE legislation that we have crafted is the kind of bill that Members of the Senate can support.

In fact, as part of the budget, Senator SNOWE and I teamed up, and we offered a specific funding plan. And 54 Members of the Senate are now on record—they are now specifically on record—with respect to the Snowe-Wyden funding plan for paying for prescription drug benefits. So we are now in a position, it seems to me, colleagues, to take specific action.

One of the reasons I have come to the floor tonight is my hope that we can really show how urgent this need is.

What I have done, as the poster next to me says, is urge senior citizens to send in copies of their prescription drug bills, directly to their Senator, U.S. Senate, Washington, DC. I have decided I am going to, in my discussions on the floor each evening, read a portion of the letters I am receiving from seniors at home in Oregon.

I read about one group in the newspaper the other day who said it is not really that urgent a need. More than 20 percent of the Nation's senior citizens are spending over \$1,000 a year out of pocket for their prescription medicine.

I read a couple of nights ago about an elderly woman from southern Oregon whose income is just over \$1,000 a month in Social Security. She spends more than half of it on her prescriptions.

Those are the kinds of accounts we are hearing again and again and again. The fact is, our senior citizens are getting shellacked twice. First, Medicare doesn't cover prescriptions. That is the way the program began in 1965. I was director of the Gray Panthers at home for about 7 years before I was elected to Congress. The need was very acute back then for prescription drug coverage. But today it is even more important, for two reasons.

First, the senior citizen, who not only gets no Medicare coverage for their prescriptions, is now subsidizing the big buyers such as the health maintenance organizations that are in a position to negotiate big discounts. These big buyers, the health maintenance organizations, have real bargaining power and clout. They go out and negotiate a discount; they get a break. If you are a senior citizen, for example, in Myrtle Creek, OR, or Philomath—I will read from those letters in a moment—you end up subsidizing those big buyers. I don't think that is right.

In addition, since the days when we began to push, with the Gray Panthers, for prescription drug coverage, a lot of the new, important prescriptions are preventive in nature. I described several days ago an important anticoagulant drug that can help with a variety of ailments relating to strokes. The cost of that anticoagulant drug is in the vicinity of about \$1,000 a year. You have a full-scale stroke that can come about if you don't get the medicine, and the cost can be \$100,000 a year.

When people ask me, can this country afford to cover prescription drugs under Medicare, my view is, our country cannot afford not to do it. As part of this campaign we have launched in the Senate to have seniors send in, as this poster says, copies of their prescription drug bills, Senator SNOWE and I have teamed up on a bipartisan kind of plan. I am going to read from these letters. I will take just a couple of minutes for that tonight.

Just a couple of days ago, I heard from a woman in Philomath, OR, who

wrote me about her mother. Her mother had recently spent more than \$2,220 on prescription drugs. The daughter said—this was particularly poignant, in my view—the only way her mother was able to, in effect, cover her prescription needs was that her mother was getting samples from the doctor. The fact that she spent more than \$2,220 on prescription drugs and the year isn't even over yet is dramatized by the fact that the cost would be much greater were it not for the fact that she was getting samples to supplement what she was paying for. That is the kind of account we are hearing from seniors in Oregon, as they, as this poster says, send in copies of their prescription drug bills. I hope we will get more of that.

We need to deal with this issue on a bipartisan basis. Senator SNOWE and I have chosen to model our program after the Federal Employees Health Benefit Plan. The SPICE proposal we introduced is sort of a senior citizens version of the Federal Employees Health Benefit Plan. The elderly population, of course, is different from that of the Federal workforce, but the model of trying to offer choices and options and alternatives to make sure there is competition in health care of the kind Senator GRAHAM has advocated in the past is very sensible. If it is good enough for Members of Congress, it certainly ought to be the kind of thing we look at to cover older people. It is especially important because it can be a model that prevents cost shifting on to other groups of citizens.

There are other proposals, for example, that in effect have Medicare sort of buying up all the prescription drugs and taking the lead as the purchaser. What concerns me about that approach is, I think you will have massive cost shifting on to other groups of individuals. Nobody in the Congress intentionally would want to see a proposal developed that would, in effect, give a discount to folks on Medicare and then just have the cost shifted over to somebody who was 27 years old and had a couple of kids and was working hard and doing their best to get ahead in life. We have to use marketplace forces to develop and implement this benefit.

The proposal I have introduced with Senator SNOWE is one that uses those marketplace forces. It would give seniors the kind of bargaining power a health maintenance organization and a big buying group would have, but it wouldn't involve a lot of price controls. It wouldn't involve a lot of micro-management. It wouldn't be sort of one-size-fits-all health care.

As we go ahead with this bipartisan campaign, the bill on which Senator SNOWE and I have teamed up is, in fact, the only bipartisan measure now before the Senate. I am going to come to this floor as often as I can and urge seniors to send in copies of their prescription drug bills directly to their Senator and just keep bringing to our colleagues' attention the need for action on this issue.

The second letter I want to describe tonight comes from an elderly couple from my hometown in Portland who said they have already spent \$1,750-plus on their prescription drug costs so far this year. They wrote: We have saved all our life, never knowing what health problems would befall us. We are glad to pay our fair share, but the cost of prescription drugs is eating up our savings.

Finally, a constituent from Myrtle Creek has written that recently they spent \$700 on prescription medicines. This exceeds the so-called average many of the experts in the beltway are talking about as not being that big a deal for senior citizens. This is a bill incurred by an older person from Myrtle Creek. We hear the same thing from Portland, OR. We hear the same thing from Philomath, OR. This is what we are hearing all across this country.

It would be a terrible shame, in my view, for the Senate to say we are not going to act, we are going to let this become a big campaign issue in the 2000 election, and Democrats and Republicans can engage in a lot of finger pointing and, in effect, sort of put out that the other side doesn't care, the other side isn't interested. We will end up seeing this issue drag on well into the next century.

I believe the Snowe-Wyden legislation, the only bipartisan bill now before the Senate on prescription drugs, may not be the last word on this issue. It is not going to be enacted into law with every I dotted and every T crossed, as it has been proposed thus far, but I do believe it can serve as a model.

It is bipartisan. Fifty-four Members in the Senate are already on record as having cast a vote for the specific plan we have to fund this program. And so the opportunity to make the lives of older people in this country better, to help those who are scrimping and not taking their drugs the way they ought to, to be able to do it in a way that uses marketplace kinds of forces and provides choices and options, just the way our families get, seems to be an opportunity we cannot afford to pass up.

I know Senator GRAHAM, who has done good work on the health care issue and the prescription issue as a member of the Finance Committee, is here to talk. The hour is late. But I intend to keep coming to the floor of the U.S. Senate and pushing for action on this issue. There is a bipartisan bill before the Senate now. This would be the kind of issue that could be a legacy for this session of the Congress. I intend to keep coming to the floor of the U.S. Senate, reading from the letters I am getting from home, urging seniors to do as this poster says: Send in copies of your prescription drug bills.

I intend to come back to this floor again and again and again, until we get action on this matter. For years, since the days when I was director of the Oregon Gray Panthers at home, I have

had a dream that the U.S. Congress would make sure that older people who aren't taking their medicines because they can't afford it would be able to get this coverage.

The opportunity to team up with Senator SNOWE has been a real pleasure for me. She has been speaking out on this issue. I will continue to speak out on it, and we are going to do everything we can to make sure the U.S. Senate acts on this question and does it in this session of the Congress.

I yield the floor.

The PRESIDING OFFICER. The Senator from Florida is recognized.

IN HONOR OF THEODORE ROOSEVELT AND JOHN CHAFEE

THE NATIONAL PARK SYSTEM

Mr. GRAHAM. Mr. President, I rise today to honor two visionary statesmen—President Theodore Roosevelt and Senator John Chafee. Today, October 27, 1999, we celebrate what would have been President Theodore Roosevelt's 141st birthday. Last Friday, we celebrated John Chafee's 77th—and much to our sadness his last.

Working at opposite ends of the 20th century, these two outstanding leaders contributed greatly to the cause of preserving our precious natural resources for this and especially for future generations.

President Roosevelt was born on October 27, 1858, in New York City. He is remembered as one of our finest Presidents. He is honored as such by being the only 20th century President to join Presidents Washington, Jefferson, and Lincoln at Mount Rushmore.

In 1901, after the assassination of President McKinley, Theodore Roosevelt became America's youngest President. As a child, Roosevelt was faced with poor health and asthma. To escape the pollution of New York City, Roosevelt's father would often take him to Long Island for extended visits. It was there that Roosevelt began his lifelong devotion to the outdoors and to vigorous exercise. His dedication to the "strenuous life" was a hallmark of his career.

In 1884, his first wife, Alice Lee Roosevelt, and his mother died on the same day. Roosevelt spent much of the next two years on his ranch, the Elkhorn, located in the Badlands of the Dakota Territory.

Today, a portion of this ranch is included in the national park named in his honor—the Theodore Roosevelt National Park in North Dakota. History shows Roosevelt to be a true visionary as one reviews his many accomplishments. The Panama Canal, one of the world's engineering marvels, would not have been complete without President Roosevelt's tenacious leadership. He is remembered by business and labor as a "trust buster" who spearheaded the dissolution of a large railroad monopoly in the Northwest using the Sherman Antitrust Act.

In 1905, Roosevelt won the Nobel Peace Prize for mediating an end to the Russo-Japanese War.

But perhaps his greatest contribution to future generations of Americans was his passionate advocacy of conservationism. The history of our Nation is marked by activism on public lands issues. The beginning of the 19th century was marked by President Thomas Jefferson's purchase of the Louisiana Territory. That one purchase added almost 530 million acres to the United States. The Louisiana Purchase changed America from an eastern coastal Nation to a continental empire.

Roosevelt set the tone for public lands issues at the beginning of the 20th century. His words and his actions created a new call to America's environmental ethic. Theodore Roosevelt said, "We must ask ourselves if we are leaving for future generations an environment that is as good, or better, than what we found."

He lived up to his challenge. Mr. President, listen to what Theodore Roosevelt contributed to the public lands legacy of the United States. During his period in the White House, from 1901 to 1909, Theodore Roosevelt designated 150 national forests; the first 51 Federal bird reservations; 5 national parks; the first 18 national monuments; the first 4 national game preserves; and the first 21 reclamation projects.

Theodore Roosevelt also established the National Wildlife Refuge System, beginning with Pelican Island in Florida, which was designated in 1903. Together, these projects equaled Federal protection for almost 230 million acres—a land area equivalent to that of all the east coast States from Maine to Florida and just under one-half of the area of the Louisiana Purchase.

Theodore Roosevelt's contributions to the public land trust cannot be equaled. Perhaps even greater was his contagious passion for the ethic of conservation that he managed to instill for the first time in America's consciousness, the idea of conservation and environmental protection as goals worthy of pursuit.

Mr. President, Senator John Chafee was a leader in the Theodore Roosevelt model. Senator Chafee was a major participant in every piece of environmental legislation that passed the Congress since the early 1980s. He authored the Superfund program, created in 1980 to direct and fund the cleanup of hazardous waste dump sites and leaking underground storage tanks.

In 1982, he sponsored the Coastal Barrier Resources Act, a law that resulted in the preservation of thousands of acres of coastline throughout the Nation.

He led major reform of the Clean Water Act in 1986, introducing more thorough controls on industrial pollution and a new emphasis on non-point source pollution.

He created the National Estuary Program to protect coastal resources and